



Grant Evaluation Form

[This [Grant Evaluation Form](#) may be downloaded to your computer from our website.]

***Please Complete and Return to the Community Foundation
when the program/project is complete or the grant monies expended.***

Organization Name _____

Program or Project _____

Person Completing this Form _____

Phone Number _____ Email Address _____

Grant Year**: _____ Total amount of Grant \$ _____ Amount used for this report \$ _____
** (*Ex: If you applied in 2009-Grant Year is 2009.*)

Report on the Budget and Actual income and expenses for the program on the reverse of this form.

Did the program/project meet its stated objectives? Yes No Explain how or why not.

Did the program/project meet the presented timeline? Yes No If not, what changes were made.

What are the results/outcomes of your evaluation of the program/project? Or what changes will be made?

How did the Community Foundation grant make a difference in delivering the program/project?

Any additional information you would like to provide may be written on the reverse of this form.

***Please enclose any photos with releases for the Community Foundation's
annual report or newsletter and send by email to Cynthia@MiddlesexCountyCF.org.***

Program or Project _____

Income Sources	Budget	Actual	Difference
Total			

Expense Items	Budget	Actual	Difference
Totals			

Summary	Budget	Actual
Income		
Expense		
Difference		

Explanations, if necessary.